

Nursing Education Newsletter

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Texas Board of Nursing

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Greetings from the Education Consultants

Editor: Gayle P. Varnell, PhD, APRN, CPNP-PC (our FROG Expert)

Find, Reflect, Organize, & Generate news = FROG



The Texas Board of Nursing (BON) Education Consultants have prepared this newsletter for information purposes

for programs. Please share with the nursing faculty in your school. The

education consultants join you in working remotely as we continue to learn how to adapt to the "Virtual World".



The Differentiated Essential Competencies Were Revised for 2021!

The DECs were revised and were formerly approved by the Texas Board of Nursing (BON or Board) at the January 2021 Board Meeting. A report of the updated DECs can be viewed on the Board's website at: January 2021 Board Meeting – Agenda Item 7.2.

A final version of the revised DECs is available on the BON webpage under Education and Documents.

Updating the DECs involved several steps over approximately four months:

- a comprehensive review of current literature, research, BON documents, accreditation and practice standards, and newer versions of previous documents referenced in the 2010 version;
- suggested revisions from a BON team of education and practice consultants;
- input from stakeholders (practice and education representatives) in an all-day meeting;
- review and approval by Board members.

The Introduction in the DECs provides an historical background dating back to the first statewide competencies in 1993 and lists the guiding principles that have created an ageless document:

- The DECs are client-focused, rather than institution-focused.
- The DECs are NOT a list of tasks or skills.

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Upcoming Events

2021 Quarterly Board Meetings

April 22, 2021

The April Board Meeting will be a Virtual Meeting

July 22-23, 2021

October 21-22, 2021

Agendas and minutes are available on the Board of Nursing website under the **News** heading.

- Competencies provide essential role responsibilities, knowledge, and clinical behaviors and judgments in broad terms.
- Programs retain the ability to develop and create curricula for their individual communities, level of education, and program outcomes while focusing on the DECs.
- The DECs are not all-inclusive of all nursing competencies, but list competencies necessary for the nursing program graduate to seek licensure and enter nursing practice.

The 25 core competencies provide a set of outcomes expected of nursing education programs to ensure that nursing graduates enter practice as safe, competent nurses.

New concepts in the 2021 revision include service excellence, self-care, spirituality, social determinants of health, workplace violence, civility, cybersecurity, global health, and pandemics.





For questions about the revised DECs please contact the BON Nursing Department Administrative Assistant, Jackie Ballesteros at, Jackie.Ballesteros@bon.texas.gov

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Education Guidelines Have Been Updated

Please review the <u>newly</u> revised Education Guidelines.

We believe that you will find them easier to use and a good resource for you in the future.



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Contact Information

Nursing Education PH: (512) 305-6816

Education Guidelines

Education FAQs

Texas Board of Nursing 333 Guadalupe Suite 3-460 Austin, Texas 78701

www.bon.texas.gov

Deans and Directors Virtual Orientation Session



The Deans and Directors Orientation Sessions continue to be offered virtually. The most recent Orientation Session was held February 25, 2021. Although the Education Consultants miss seeing the new directors in person, the positive side is that since these Orientation Sessions are virtual, we can

accommodate more people! The online Orientation Session is three hours in length to give the most important information to newly appointed nurse leaders to be successful in the director role. The dates for the remaining two Orientation Sessions are scheduled for June 3, 2021, and October 14, 2021. It is too early to determine whether these will be virtual or face-to-face in Austin. Stay tuned for more details. (back to topics)

Kudos and Thank You to Our Pioneers of the First Virtual Survey Visits



The results are in. The Virtual Survey Visits have been a huge success. For those programs who were the first to join us in this new adventure, the Education Consultants want to give you a huge THANK YOU! You met the challenge and far exceeded our expectations. The experience has been a very positive one. So much so that we shared our experiences when we spoke at TAVNE as well as during an NCSBN Education Call where we highlighted how we conducted virtual survey visits in Texas to make sure our programs were

in compliance with Board Rule. Ordinarily we would visit a campus, meet with administration, faculty and students, attend a class, take a tour of the simulation labs and resources for the students, etc. Using the program's platform, the necessary documents could be shared and we were able to meet virtually with everyone that we needed to see. Everything went very smoothly and one of the best things was the involvement of the whole campus in the visit. IT was especially good at recording virtual tours. Ordinarily when we would visit a campus that had extension sites, we could not visit the other campuses due to the distance. Program directors made it possible for us to visit all the campuses. Seeing the extension sites allowed us to validate that there was consistency among the sites and all students had the same opportunities.

Programs have set the bar high for the programs that will be having Virtual Visits this year. The Good News is that the programs that were the first are very willing to share with you their experiences and how they accomplished what they did.



If you go to the Board Reports for the January 2021 meeting, you can see the reports from the programs that received a Virtual Visit in the Fall. Program Directors are more than willing to share with others how they created their Virtual Visit.

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Rule 214.7 and 215.7 Were Updated After the Last Legislative Session

Please Check Your Policies to see that they reflect these changes.

Board Rule 214.7 (3) and 215.7 (3) now read as follow: "Written policies for nursing faculty shall also include: terms of employment, plans for faculty orientation to the institution and to the nursing program, resources and opportunities for faculty development and evaluation of faculty, and Nursing Peer Review, as described in §217.19 (relating to Incident-Based Nursing Peer Review and Whistleblower Protections) and §217.20 (relating to Safe Harbor Nursing Peer Review and Whistleblower Protections) of this title."

Have questions? Please see the FAQs on the BON website.

(FAQs on next page)

Frequently Asked Questions - Nursing Peer Review

Topics	
General Nursing Peer Review Information	Safe Harbor Nursing Peer Review
Incident–Based Nursing Peer Review	

Want to learn more? Please consider attending the online workshop on this topic.

Nursing Peer Review: Safe Harbor Nursing Peer Review and Whistleblower Protections

The purpose of this online continuing education offering is to provide all licensed nurses with information on the current standards of nursing practice, rules, and regulations applicable to Safe Harbor Nursing Peer Review and Whistleblower Protections in Texas. Participation in this course will contribute to the nurse's ability to know and conform with the Texas Nursing Practice Act, Nursing Peer Review Law, and the Board's rules and regulations, which in turn will promote and protect the welfare of the public as evidenced by participant post-test responses.

CNE Credit: Approved for 1.3 contact hours.

More Information

Duration: 1.00 **Cost:** \$25.00

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What is a "Quality" Nursing Education Program?

Every nursing program wants to be known as a quality program, but there has been no evidence about what constitutes quality before the NCSBN study published in 2020 (Spector et al., 2020). A large mixed-method study that began in 2017 collected nationwide data from nursing boards and surveyed education consultants, nursing faculty, and practicing nurses, using a Delphi method for analysis. It was the results from the Delphi study that yielded 18 quality indicators of nursing programs based upon respondents' expertise and consideration of program outcomes. The quality indicators describe positive program characteristics that tend to be present in successful programs. These are not rules but they do represent goals to which programs may aspire. The Education Consultants find these to be helpful when they are assessing a program. A list of the identified quality indicators with explanations for each follows:

- 1. Administrative support of the nursing program: It is evident that the school administration expresses and provides positive support of the program with adequate resources for a successful program.
- 2. **Consistent leadership in the nursing program:** The Program Director has served in the role as leader of the program for a number of years with the intent of providing ongoing excellence in the position. (continue →)

- 3. Consistent full-time faculty as opposed to reliance on adjunct faculty: Nursing faculty who maintain a commitment to a program gain experience not only as faculty, but also with the particular curriculum. It may be necessary to hire some adjunct faculty but their familiarity with the curriculum and the students is not as strong as full-time faculty and often adjunct faculty have no stake in the program.
- 4. **Faculty with current clinical competence:** Faculty should be allowed and expected to maintain their clinical skills through actual practice, shadowing nurses in the affiliating agencies, supervising students in the clinical area, and maintaining currency through continuing education.
- 5. Evidence-based curriculum that emphasizes critical thinking and clinical reasoning skills: The curriculum should focus on teaching students to critically think through patient situations and make clinical judgment based upon their knowledge and skills. This is especially important in preparation for the Next Generation NCLEX.
- 6. Evidence-based curriculum that emphasizes quality and safety for patient care: The faculty should conscientiously and continuously emphasize quality and safety, and question students about their interventions to advocate for patient safety.
- 7. Clinical experiences with actual patients that prepare students for the reality of clinical practice: Hands-on experiences occur where there are patients receiving nursing care and these learning opportunities are essential in a nursing program. A balance of clinical learning includes skills labs, a variety of simulation experiences, and nursing care of actual patients.
- 8. Opportunities for a variety of clinical experiences with diverse populations: This is best done by allowing students practice experiences in a number of different clinical or community areas. A mixture of clinical settings will promote meeting this quality indicator.
- 9. Quality simulation to augment clinical experiences: This refers to the use of high-fidelity simulation experiences under the supervision of trained faculty and including debriefing and feedback. These promote student readiness for hands-on experiences with actual patients in clinical settings, and also allow experiences not always available in the clinical setting.
- 10. Admission criteria that emphasize a background in the sciences: Including a requirement for studies in the sciences as an admission criteria has been shown to increase the likelihood that an applicant will be successful in a nursing program.
- 11. **National nursing accreditation:** Nursing programs that hold national nursing accreditation have a history of better educational outcomes for graduation rates and NCLEX scores. Standards for accreditation often require a nursing program to move to a higher level of educational quality whereas Board rule requirements focus on preparing the graduate for entry level into practice.
- 12. A systematic process to address and remediate student practice errors: This indicator requires that faculty carefully assess students in the clinical area and provide remediation for practice errors or near-misses, thus promoting safe and skillful practice.
- 13. Collaboration between education and practice when planning clinical experiences: The literature stresses that students' clinical experiences are more valuable when there are good relationships between the program and the clinical setting. This takes effort on the part of everyone involved: Nursing Director, faculty, students, and practicing nurses on the unit. Faculty should be able to discuss how this is done and its effectiveness. (continue →)

- 14. Consistent NCLEX pass rates above the requirement: The consistency of the annual pass rates is more important than each pass rate. Programs that barely make the 80% pass rate are in jeopardy for low pass rates. If a program's pass rate fluctuates widely each year, it is matter of concern
- 15. Faculty are able to role model professional behaviors: It has been said that students learn to be just like their faculty because of the modeling. Students learn skills from the faculty, but they also learn how to act in the role and how to interact with patients, patients' families, nurses, and other members of the health care team.
- 16. Administrative support for ongoing faculty development: There should be a plan for the ongoing development of each faculty member with funding to support the process. Continuing education not only educates faculty but energizes them for better teaching.
- 17. Ongoing systematic evaluation of the nursing program: The Total Evaluation Plan (TPE) is the heart of a nursing program. Using the TPE as a tool for identifying weak areas and making improvements will keep a program strong, current, and exciting;
- 18. **Comprehensive student support services:** When this is missing, the school often relies on nursing faculty to be the counselors, advisors, tutors, and admission coordinators. This takes away from their main purpose to facilitate the curriculum and learning.

Few programs possess all of these quality indicators. It is not required to be able to claim all of them. But programs can use them to measure their quality and identify areas for quality improvement.

Spector, N., Silvestre, J., Alexander, M., Martin, B., Hooper, J. I., Squires, A., & Ojemeni, M. (2020). NCSBN regulatory guidelines and evidence-based quality indicators for nursing Education programs. *Journal of Nursing Research*, 11(2), S1-S64.

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Thank You Faculty and Nursing Students for Your Part in Giving the COVID-19 Vaccine

We would like to take this opportunity to recognize and thank all of our Nursing Programs who participated in the administration of the COVID-19 Vaccine.





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Lessons from COVID-19

COVID-19 abruptly interrupted all aspects of our lives, including nursing education. The pandemic has forced changes in the learning process and some of the changes will remain and some will create other changes. It has not been easy, but here are possible outcomes that seem to be positive:

- 1. There is a renewed interest in becoming a nurse to join the force of nurses who provided the valuable care to very ill patients. When a grandmother asked her granddaughter if she still wanted to go into nursing considering the risks of caring for COVID-19 patients, the granddaughter replied, "more than ever." USA Today reported this phenomenon of a new inspiration and motive for potential nursing students. Respect for nurses has increased as the public became more aware of the necessity for competent nursing care.
- 2. Nursing faculty showed resilience and innovation as they switched teaching strategies to a remote format practically overnight. Though there was concern about losing the personal touch that occurs with face-to-face interactions, many agree it has been more effective than expected and a hybrid model will probably develop as a regular modality.
- 3. Students and faculty both report that faculty have been engaged in more one-on-one time with students and this has resulted in more individual growth in students.
- 4. Curriculum will no doubt receive a serious review, considering the experiences of teaching through COVID-19, and the result will be an updated program.
- 5. As clinicals reopen to students, faculty will be interested in providing quality experiences with hands-on patient care while taking advantage of other clinical modalities: skills labs and simulation activities. With the emerging focus on competency-based education and evaluation of students, faculty should seek opportunities to develop their skills in these areas.

So, how has nursing education fared through this crisis? Reflecting on the experiences of dealing with COVID-19 and maintaining nursing education, one program director said, "Faculty and students thrived, not just survived." One bit of evidence that this was true was in the successes of nursing students on the NCLEX examination, with Texas averages above the national average.

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Contact Information for the Education Team:

Kristin K. Benton, DNP, RN, Director of Nursing Virginia D. Ayars, EdD, MS, RN, CNE Janice I. Hooper, PhD, RN, FRE, CNE, FAAN, ANEF Beverly Skloss, MSN, RN Gayle P. Varnell, PhD, APRN, CPNP-PC Bruce Holter, Information Specialist Jackie Ballesteros, Administrative Assistant Kristin.Benton@bon.texas.gov Virginia.Ayars@bon.texas.gov Janice.Hooper@bon.texas.gov Beverly.Skloss@bon.texas.gov Gayle.Varnell@bon.texas.gov Bruce.Holter@bon.texas.gov Jackie.Ballesteros@bon.texas.gov